

16617, U. S. P. 35

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------|----------|--------|----------|
| FEE DETERMINATION | NW | 71622 | 07-27-89 |
| O.I.P.E. CLASSIFIER | | 71622 | 8-10-89 |
| FORMALITY REVIEW | | 71622 | 10-6-89 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
= Allowed I Interference
- (Through numeral) Canceled A Appeal
+ Restricted O Objected

BEST AVAILABLE COPY

| Claim | Date |
|----------|------|
| Final | |
| Original | |
| 1 | ✓ |
| 2 | ✓ |
| 3 | ✓ |
| 4 | ✓ |
| 5 | ✓ |
| 6 | ✓ |
| 7 | ✓ |
| 8 | ✓ |
| 9 | ✓ |
| 10 | ✓ |
| 11 | ✓ |
| 12 | ✓ |
| 13 | ✓ |
| 14 | ✓ |
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| 37 | ✓ |
| 38 | ✓ |
| 39 | ✓ |
| 40 | ✓ |
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| 43 | ✓ |
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| 45 | ✓ |
| 46 | ✓ |
| 47 | ✓ |
| 48 | ✓ |
| 49 | ✓ |
| 50 | ✓ |

| Claim | Date |
|----------|------|
| Final | |
| Original | |
| 51 | ✓ |
| 52 | ✓ |
| 53 | ✓ |
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| 100 | ✓ |

| Claim | Date |
|----------|------|
| Final | |
| Original | |
| 101 | ✓ |
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| 143 | ✓ |
| 144 | ✓ |
| 145 | ✓ |
| 146 | ✓ |
| 147 | ✓ |
| 148 | ✓ |
| 149 | ✓ |
| 150 | ✓ |

If more than 150 claims or 10 actions
staple additional sheet here